

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/579,426
		Filing Date	May 12, 2006
		First Named Inventor	Rafferty
		Art Unit	Not yet assigned
		Examiner Name	Not yet assigned
Total Number of Pages in This Submission	2	Attorney Docket Number	VIS/002

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): POWER OF ATTORNEY/CORRESPONDENCE ADDRESS CUSTOMER NO. 54698
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

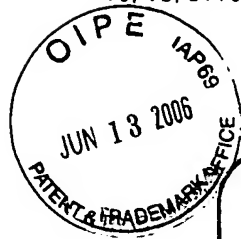
Firm	Moser IP Law Group		
Signature			
Printed Name	Alan Taboada		
Date	6/9/06	Reg. No.	51,359

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Kathleen Faughnan	Date	June 9, 2006

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PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0551-0035

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	10/579,426
Filing Date	May 12, 2006
First Named Inventor	Rafferty
Title	HEARING AID THAT FACILITATES REMOVAL OF EARWAX AND TRAPPING OF MOISTURE
Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket Number	VIS/002

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

54688

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Moser IP Law Group		
Address			
City	State	ZIP	
Country			
Telephone	Email		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/38)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Richard A. Rafferty</i>	Date	6/2/06
Name	Richard A. Rafferty	Telephone	732-842-3119
Title and Company	N/A		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

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